




## Council Communication

**TO:** HONORABLE MAYOR AND COUNCILMEMBERS

**FROM:** LISA MAXWELL, DEPUTY TOWN CLERK 503-6867

**THROUGH:** CATHY TEMPLETON, TOWN CLERK 

**MEETING DATE:** AUGUST 1, 2013

**SUBJECT:** SPECIAL EVENT LIQUOR LICENSE – THE ISLANDS WOMENS CLUB OF GILBERT

<b>STRATEGIC INITIATIVE:</b>	N/A
<b>LEGAL REVIEW</b>	<b>FINANCIAL REVIEW</b>
<input type="checkbox"/> Complete	<input type="checkbox"/> Complete
<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A

### RECOMMENDED MOTION

A MOTION TO APPROVE A SPECIAL EVENT LIQUOR LICENSE FOR THE ISLANDS WOMENS CLUB OF GILBERT FOR FUNDRAISING FOR THE CLOTHES CABIN ON OCTOBER 19, 2013 FROM 6:00 PM TO 10:00 PM AT SOUTH ISLANDS DRIVE (SOUTH OF ELLIOT ROAD ADJACENT TO THE FOUNTAIN).

### BACKGROUND/DISCUSSION

A Special Event Liquor License is required to authorize the sale of alcohol to the public at special events. The organization applying for the license must receive a minimum of 25% of the proceeds from the gross revenues of alcoholic beverage sales.

The Town has received an application for the following Special Event Liquor License:

Event:	Fundraising for The Clothes Cabin
Event Location:	South Islands Drive

Non-Profit Applicant:

The Islands Womens Club of Gilbert

Date(s)/Time(s) of Event:

October 19, 2013; 6:00 PM – 10:00 PM

Percent of Proceeds to Non-Profit Applicant:

25% to The Islands Womens Club of Gilbert

The estimated attendance at the special event is 100 people. This event is for fundraising for The Clothes Cabin. The Special Event liquor license has been reviewed by Town staff, including Code Compliance and the Police Department and no adverse information has been received. *The Police Department reviewed the security plan and the proposed security measures are adequate for this type of event.*

The applicant is required to comply with the Arizona Revised Statutes and Arizona Administrative Rules (Attachment 1).

Special Event liquor license applications may be approved or denied by Council. The application was reviewed by the Police Department. The recommendation of the Council will be forwarded to the Arizona Department of Liquor License & Control. The Arizona Department of Liquor License & Control honors the Council's recommendation.

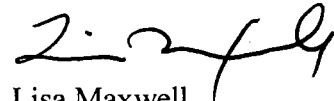
### **FINANCIAL IMPACT**

The special event liquor license fee is \$50.

### **STAFF RECOMMENDATION**

Staff feels such requests are solely Council's prerogative and offers no recommendation on this request.

Respectfully submitted,



Lisa Maxwell  
Deputy Town Clerk

Attachments and Enclosures:

Attachment 1 – Special Event Liquor License Application

Attachment 2 – Summary of Laws/Rules

## Attachment 2

Special Event Liquor Licenses are subject to the provisions of A.R.S. §4-203.02, §4-244, and §4-261 and Administrative Rules R19-1-228, R19-1-235, and R19-1-309. The Arizona Department of Liquor Licenses and Control Special Event Liquor License application packet states that these laws and rules are applicable to a Special Event Liquor License.

Some of the key provisions include:

- Authorizes issuance of Special Event Liquor Licenses subject to approval of the governing body of a city or town for events to be held in a city or town and establish qualifying organizations.
- Sets forth requirements for the purchase/sale of liquor to be served at the event.
- Prohibits the sale, disposal, delivery or consumption of spirituous liquor to a person between the hours of 2:00 a.m. and 6:00 a.m. on weekdays, and 2:00 a.m. and 10:00 a.m. on Sunday.
- Prohibits a licensee or other person to sell, furnish, dispose of or give, or cause to be sold, furnished, disposed of or given, to a person under the legal drinking age or for a person under the legal drinking age to buy, receive, have in the person's possession or consume spirituous liquor; established when an underage person can be on premises. Prohibits a person under the age of twenty-one years to have in the person's body any spirituous liquor.
- Prohibits a person who is obviously intoxicated to buy or attempt to buy spirituous liquor from a licensee or employee of a licensee or to consume spirituous liquor on licensed premises.
- Requires warning signs related to consumption of spirituous liquor during pregnancy and requires posting of signage.
- Prohibits licensee and unpaid volunteers from consuming liquor when waiting on or serving customers.
- Prohibits serving, selling, or furnished spirituous liquor to a disorderly or obviously intoxicated person, or for a licensee or employee of the licensee to allow or permit a disorderly or obviously intoxicated person to come into or remain on or about the premises, except that a licensee or an employee of the licensee may allow an obviously intoxicated person to remain on the premises for a period of time of not to exceed thirty minutes to allow for transportation.
- Prohibits a licensee or employee to knowingly permit the unlawful possession, use, sale or offer for sale of narcotics, dangerous drugs or marijuana on the premises; knowingly permit prostitution or the solicitation of prostitution on the premises; permit unlawful gambling on the premises; permit trafficking or attempted trafficking in stolen property on the premises.
- Prohibits person other than a peace officer, the licensee or an employee of the licensee acting with the permission of the licensee to be in possession of a firearm while on the licensed premises of an on-sale retailer knowing such possession is prohibited.
- Prohibits a licensee or employee to knowingly permit a person in possession of a firearm other than a peace officer, the licensee or an employee of the licensee acting with the permission of the licensee to remain on the licensed premises or to serve, sell or furnish spirituous liquor to a person in possession of a firearm while on the licensed premises of an on-sale retailer.

# ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor  
Phoenix, Arizona 85007-2934  
(602) 542-5141

RECEIVED

JUL 11 2013

## APPLICATION FOR SPECIAL EVENT LICENSE

TOWN OF GILBERT

Fee = \$25.00 per day for 1-10 day events only CUSTOMER SERVICE CENTER

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. § 44-6852)

**NOTE: THIS DOCUMENT MUST BE FULLY COMPLETED OR IT WILL BE RETURNED.**  
PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING.

\*\*Application must be approved by local government before submission to  
Department of Liquor Licenses and Control. (Section #20)

DLIC USE ONLY

LICENSE #

- Name of Organization: THE ISLANDS WOMENS CLUB OF GILBERT
- Non-Profit/I.R.S. Tax Exempt Number: 74-2519020
- The organization is a: (check one box only)
  - ☒ Charitable
  - ☐ Fraternal (must have regular membership and in existence for over 5 years)
  - ☐ Civic
  - ☐ Religious
  - ☐ Political Party, Ballot Measure, or Campaign Committee
- What is the purpose of this event? ☒ on-site consumption ☐ off-site consumption (auction) ☐ both

- Location of the event: S. ISLANDS DR, GILBERT, AZ 85233  
Address of physical location (Not P.O. Box) City County Zip

**Applicant must be a member of the qualifying organization and authorized by an Officer, Director or Chairperson of the Organization named in Question #1. (Signature required in section #18)**

- Applicant: SALVATI MARY L 3-31-49  
Last First Middle Date of Birth

- Applicant's Mailing Address: 1300 W WARNER #2034 GILBERT, AZ 85233  
Street City State Zip

- Phone Numbers: (480) 545-7740 (480) 813-5567 (602) 793-9632  
Site Owner # Applicant's Business # Applicant's Home #

- Date(s) & Hours of Event: (see A.R.S. 4-244(15) and (17) for legal hours of service)

	Date	Day of Week	Hours from A.M./P.M.	To A.M./P.M.
Day 1:	<u>10-19-13</u>	<u>SATURDAY</u>	<u>6 P.M</u>	<u>10 P.M</u>
Day 2:				
Day 3:				
Day 4:				
Day 5:				
Day 6:				
Day 7:				
Day 8:				
Day 9:				
Day 10:				

17. Your licensed premises is that area in which you are authorized to sell, dispense, or serve spirituous liquors under the provisions of your license. The following page is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control measures and security positions.

10. Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked?  
☐ YES ☒ NO (attach explanation if yes)

11. This organization has been issued a special event license for 1 days this year, including this event  
(not to exceed 10 days per year).

12. Is the organization using the services of a promoter or other person to manage the event? ☐ YES ☒ NO  
If yes, attach a copy of the agreement.

13. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds.  
**THE ORGANIZATION APPLYING MUST RECEIVE 25% OF THE GROSS REVENUES OF THE SPECIAL  
EVENT LIQUOR SALES.**

Name THE CLOTHES CABIN 100%  
Percentage

Address 1100 N ALMA SCHOOL RD #10, CHANDLER, AZ 85224

Name \_\_\_\_\_ Percentage

Address \_\_\_\_\_

(Attach additional sheet if necessary)

14. Knowledge of Arizona State Liquor Laws Title 4 is important to prevent liquor law violations. If you have  
any questions regarding the law or this application, please contact the Arizona State Department of Liquor  
Licenses and Control for assistance.

**NOTE: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY.  
"NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT PREMISES."**

15. What security and control measures will you take to prevent violations of state liquor laws at this event?  
(List type and number of security/police personnel and type of fencing or control barriers if applicable)

1 # Police ☐ Fencing  
1 # Security personnel ☒ Barriers

Barriers provided by TOG  
Blonde provided private security

16. Is there an existing liquor license at the location where the special event is being held? ☐ YES ☒ NO  
If yes, does the existing business agree to suspend their liquor license during the time  
period, and in the area in which the special event license will be in use? ☐ YES ☐ NO

**(ATTACH COPY OF AGREEMENT)**

\_\_\_\_\_  
Name of Business ( ) Phone Number

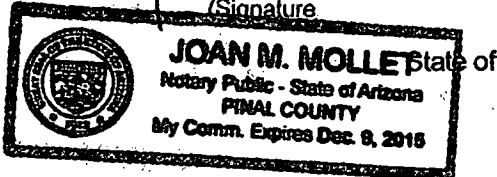
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under the provisions of your license. The following page is to be used to prepare a diagram of your special  
event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control  
measures and security positions.

*See Revised*

**THIS SECTION TO BE COMPLETED ONLY BY AN OFFICER, DIRECTOR OR CHAIRPERSON OF THE ORGANIZATION NAMED IN QUESTION #1**

18. I, MARY L SALVATI declare that I am an Officer/Director/Chairperson appointing the  
(Print full name)  
applicant listed in Question 6, to apply on behalf of the foregoing organization for a Special Event Liquor License.

X Mary L. Salvati Secretary 6.6.13 (602) 793 96  
(Signature) (Title/Position) (Date) (Phone #)



AZ County of Pinal  
The foregoing instrument was acknowledged before me this

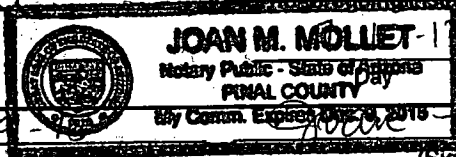
My Commission expires on: 12-9-15  
(Date)

7 - 10 - 13  
Day Month Year  
Joan M Mollet  
(Signature of NOTARY PUBLIC)

**THIS SECTION TO BE COMPLETED ONLY BY THE APPLICANT NAMED IN QUESTION #6**

19. I, MARY L SALVATI declare that I am the APPLICANT filing this application as  
(Print full name)  
listed in Question 6. I have read the application and the contents and all statements are true, correct and complete.

X Mary L. Salvati State of AZ County of Pinal  
(Signature) The foregoing instrument was acknowledged before me this



My commission expires on: 12-9-15  
(Date)

Month Year  
Joan M Mollet  
(Signature of NOTARY PUBLIC)

**You must obtain local government approval. City or County MUST recommend event and complete item #**  
**The local governing body may require additional applications to be completed and submitted 60 days**  
**in advance of the event. Additional licensing fees may also be required before approval may be granted.**

**LOCAL GOVERNING BODY APPROVAL SECTION**

20. I, \_\_\_\_\_ hereby recommend this special event application  
(Government Official) (Title)  
on behalf of \_\_\_\_\_  
(City, Town or County) (Signature of OFFICIAL) (Date)

**FOR DLLC DEPARTMENT USE ONLY**

Department Comment Section:

\_\_\_\_\_  
(Employee)

\_\_\_\_\_  
(Date)

☐ APPROVED

☐ DISAPPROVED

BY:

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)



# NEIGHBORHOOD BLOCK PARTY

## REQUEST FOR TOWN SERVICES AND ROAD CLOSURE

Fee: \$25.00

Parks and Recreation  
Department  
90 E. Civic Center Dr.  
Gilbert, AZ 85296  
(480) 503-6200-Phone  
(480) 503-6204-Fax  
[www.gilbertaz.gov](http://www.gilbertaz.gov)

*A Community of Excellence*

The Town of Gilbert business hours are Monday through Thursday, 7a.m. to 6 p.m.

Please allow five (5) business days to process prior to date of event

Contact Person: MARY SALVATI 602-783-9632  
(First & Last name) (Phone)  
1300 W. WAENER #2034, GILBERT 85233 Maria\_SALVATI@yahoo.  
(Address) (Email)

### Neighborhood Party Information:

Date of Event: 10-19-13 Time of Event: Start: 6:00 PM End: 10:00 PM

Location or Address of Event: SOUTH ISLAND DRIVES subdivision: AT THE FOUNTAIN

Activities planned for event: MUSIC & FOOD

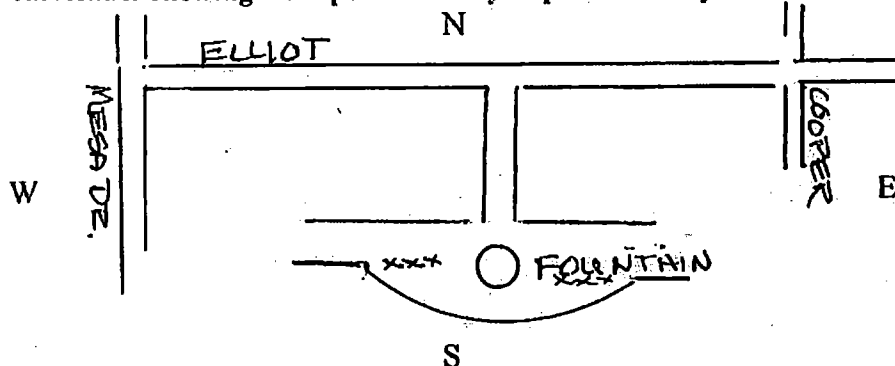
Anticipated Attendance: 100 Indicate the following: ☐ Through street ☒ Cul-de-sac <sup>2</sup> BEHIND FOUNTAIN

### Request for Solid Waste Containers and Barricades:

How many 3 Trash 3 Recycle needed? (up to three each are allowed) Barricades needed? Yes ☒ No ☐

Please name street to be barricaded: Island Drive behind fountain

Please draw a diagram of the Block Party Location: including location of barricades showing from point of entry to point of entry.



RC= Road Closed Signs		XXX= Barricades
Neely Court	RC XXXX	
	XXXX RC	
Palomino Drive		

### Please initial upon acceptance of the following:

I will notify my Home Owners Association of the Event:

I will notify the U.S. Post Office if event runs during affected business hours.

(Business hours: Monday through Saturday 8 a.m. until 4 p.m.)

I will maintain an emergency access on the closed road of at least 20 feet in width at all times.

I will constantly man the barricades in case they need to be removed for emergency access.

I will notify all the homeowners within affected area.

I CERTIFY THAT I HAVE THE AUTHORITY TO SIGN THIS REQUEST FORM AND THAT THE INFORMATION PROVIDED IS CORRECT.

Initial: ms  
Initial: ms  
Initial: ms  
Initial: ms  
Initial: ms

Print Name MARY SALVATI

Signature of Owner/Authorized Agent Mary Salvati

Date 6-6-13

FOR TOWN USE ONLY  
(11/10/11)

cc: Traffic Engineering  
Crime Prevention  
Fire Prevention  
Neighborhood Services  
P.W. Solid Waste (if black containers requested)  
P.W. Streets (if barricades requested)

PW APPROVAL OF SERVICE: \_\_\_\_\_

DATE AND TIME CONFIRMED: \_\_\_\_\_

	Barricades	Black Containers	Blue Containers
Date Delivered:			
Time Delivered:			
Total Delivered:			



**SPECIAL EVENT LICENSED PREMISES DIAGRAM**  
(This diagram must be completed with this application)

Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions)  
NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.

WE WILL SETUP BEHIND THE FOUNTAIN

N ↑

